## California and Western Medicine

Owned and Published by the

## CALIFORNIA MEDICAL ASSOCIATION

Official Organ of the California, Utah and Nevada Medical Associations FOUR-FIFTY SUTTER, ROOM 2004, SAN FRANCISCO

Telephone Douglas 0062

Editor . . . . . . . . GEORGE H. KRESS
Associate Editor . . . . . . . EMMA W. POPE Associate Editor for Nevada . . . . . . . . . . . BROWN Associate Editor for Utah . . . . . . . J. U. GIESY

Subscription prices, \$5.00 (\$6.00 for foreign countries); single copies, 50 cents.

Volumes begin with the first of January and the first of July. Subscriptions may commence at any time.

Change of Address.—Request for change of address should give both the old and the new address. No change in any address on the mailing list will be made until such change is requested by county secretaries or by the member concerned.

Advertisements.—The journal is published on the seventh of the month. Advertising copy must be received not later than the 15th of the month preceding issue. Advertising rates will be sent on request.

the 15th of the month preceding issue. Advertising rates will be sent on request.

Responsibility for Statements and Conclusions in Original Articles.—Authors are responsible for all statements, conclusions and methods of presenting their subjects. These may or may not be in harmony with the views of the editorial staff. It is aimed to permit authors to have as wide latitude as the general policy of the journal and the demands on its space may permit. The right to reduce or reject any article is always reserved.

Contributions—Exclusive Publication.—Articles are accepted for publication on condition that they are contributed solely to this journal.

Leaflet Regarding Rules of Publication.—California and Western Medicine has prepared a leaflet explaining its rules regarding publication. This leaflet gives suggestions on the preparation of manuscripts and of illustrations. It is suggested that contributors to this journal write to its office requesting a copy of this leaflet.

# EDITORIALS

#### MEDICO-ECONOMIC PROBLEMS

Three Medico-Economic Articles in the July Issue of California and Western Medicine. -Last month's issue of California and West-ERN MEDICINE contained three articles, one by Dr. John H. Graves, a second by Dr. John C. Ruddock, and a third by Dr. Rexwald Brown, which should be of more than ordinary interest and value. All three discussed medico-economic problems.

Report of Dr. Graves on "Health Insurance." -The first, a paper by Dr. John H. Graves of San Francisco, presented the results of a survey on the so-called health insurance problem. The facts presented by Dr. Graves were gathered after much effort, from many sources, and are worthy of serious thought. Dr. Graves, as chairman of the standing committee on economics, took up his study at the request of the Council of the California Medical Association. The Council during the last year or so has been giving considerable time to a discussion of ways and means through which the burdens of illness falling on the "white collar brigade" of lay citizens, might be lightened, without at the same time bringing into being a pauperization of that group of citizens or a demoralization of the standards and methods of medical practice.

One of the major objections to practically all health insurance plans is the difficulty encountered in trying to preserve the individualism in

medical practice—that intimate relationship between physician and patient which in the end works to best interests of the patient, and is equally valuable to the physician. It is through mental alertness in medical observation and practice that physicians make themselves increasingly valuable to their lay fellows and to the community. Health insurance plans which furnish "mass" care of lay persons, at small stipends to attending physicians, are bound to make for mediocrity of service, as witness the experiences of some of the European countries. Mediocrity of service means demoralization of medical standards. That is why all plans trenching on the domain of health insurance must be so carefully studied.

Report of Doctor Ruddock on "California Clinics."—A second paper of interest was the survey which on instructions from the Council was made by the standing committee on hospitals and clinics. This survey on the "California Clinic Problem" is the work of Dr. John C. Ruddock of Los Angeles and contains many facts worthy of the attention of members of the California Medical Association. If in places the information given in his report seems incomplete, such absence is due largely to the difficulties encountered in obtaining the information from the officials of certain clinics. This "clinic" situation is one that merits attention from many angles. It must be evident to all, that the medical profession, whose members give the professional services which make possible the existence of public and charitable clinics, has not only a very proper right, but an obligation to have definite information concerning the public and other hospitals and clinics within the state, so that abuses which, under one guise or another, may be creeping into such institutions can be rectified.

Paper by Doctor Brown on "The Business of Medicine."—The third paper to which attention is called is that of Dr. Rexwald Brown of Santa Barbara, who discussed a more general, though none the less important, topic, "The Business of Medicine." It is most desirable that members of the medical profession should understand the problems outlined by Doctor Brown and that they should strive to govern their actions accordingly. In the past there has been too little discussion of such matters in the meetings of our medical societies. Unless the medical profession awakens to the nature of the conditions which exist about it, and works for a betterment of deficiencies where such exist, there is danger that the future of medical practice may be seriously handicapped by unwise legislation or other procedures instituted largely by laymen.

County Societies Should Discuss These Medico-Economic Problems.—Officers of county medical societies are again urged to give these economic problems a place on meeting programs. Members who are interested should feel free to offer their services in the presentation of such reports or These medico-economic problems discussions. have an intimate relationship to the professional interests of every one of us. If we study and discuss them it will be possible for us to arrive at certain premises and joint conclusions and thus pave the way for rational action. If only a few members do the work of investigation and study, it will be found that when plans for action are presented, that no harmony of effort will be in evidence, because too many members will be pulling backward instead of forward. The time necessary to read the three articles referred to is not very great. Every reader of California and Western Medicine is urged to take that time out of regard for his personal interests and also because of those of the profession at large.

### A PROPOSED CHIROPRACTIC INITIATIVE

A Proposed Chiropractic Initiative Granting More Powers.—For some time past a proposed initiative has been circulated by certain groups of California chiropractors. Whether or not this initiative will receive a sufficient number of signatures to place it on the ballot is not yet known. It is here mentioned because it brings before us a picture of what usually happens when a commonwealth sees fit to recognize cults or sectarian schools of healing art practice.

The advent of the chiropractors into California is all a quite recent event. Their compulsory standards of preliminary education in the past were, and are still, quite far removed from the basic high school education and two years or more of liberal arts work which is demanded by regular or non-sectarian medical schools. compulsory professional curriculum and training has been, and is still, far removed from the professional training requirements of non-sectarian Nevertheless the state of California medicine. saw fit about eight years ago, through legislative and initiative action, to legally recognize this group of cultist practitioners, the state presumably being satisfied with the lower standards of preliminary education and of professional training (through acceptance of the specious plea that only a limited number of diseases would be treated, and these by non-medical and non-surgical methods).

Such initial recognition and licensure by a commonwealth is all that in the beginning is ever asked for by a cult seeking legal recognition. The leaders of such cultist groups know that once such initial legal recognition is granted, other legal privileges are almost certain to follow.

\* \* \*

What Are the Educational Standards of Chiropractors.—The Los Angeles Herald of June 11 printed an article on "Chiropractors Split on Law Revision." An excerpt from this article is worthy of perusal by all who believe that the state should protect the public health by refusing legal recognition to practitioners of the healing art, unless such applicants have given adequate evidence of suitable preliminary education and of professional training.

The excerpt sheds some light on all this and is as follows:

"Chiropractors of the state today are divided over a proposed initiative measure governing the profession in California, which is being sponsored by the Progressive Chiropractic Association and a faction of the California Chiropractic Association.

"The California Chiropractic Association officially, however, is vigorously fighting the proposed measure on the ground that it requires study of medical and surgical subjects assertedly foreign to the chiropractic profession and on the ground that it places dictatorial powers in the hands of a state board.

"According to Charles H. Wood, one of the leading members of the Progressive Chiropractic Association, the principal change in the law is that it enables the board to deny graduates of any chiropractic school not providing the curriculum prescribed in the proposed act, the right to practice in California.

"'Under the provisions of the proposed law, the board would have power to refuse examination to graduates of schools not having the curriculum prescribed in the act,' Dr. Wood said. 'Under the present law, the board has no power to investigate the schools whose graduates apply for a certificate to practice.'

"'As a matter of fact, the board at present is enjoined by the courts from doing so, and must accept the certification of the schools as to the study of the graduates without any determination as to whether the school is a fake or not.'"

\* \* \*

Other Provisions of the Proposed Initiative.— As regards the proposed initiative, we have been told there are provisions therein permitting chiropractors to do "minor surgery" (no differentiation being made as to what "minor surgery" covers); and that it provides that chiropractors should be eligible to places on the attending and resident staffs of public state, county and city hospitals; and that death certificates, industrial accident and similar reports signed by chiropractors should have full legal recognition.

As previously stated, it is not known whether a sufficient number of signatures will be secured (some ninety thousand or more are needed) to place this proposed initiative on the ballot in the coming state election. If it does find a place on the ballot, it is evident that the matter should receive the attention of all citizens who believe that California should uphold public health standards by denying special healing art privileges to those applicants whose preliminary education and professional training, according to the best modern day experience, are inadequate.